IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant	: William Shaw	Art Unit :	3774
Serial No.	: 10/762,816	Examiner :	Alvin J. Stewart
Filed	: January 22, 2004	Confirmation No.:	6207
		Notice of Allowance Date: August 20, 2010	
Title	: MEDICAL DEVICES		

MAIL STOP ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

<u>RESPONSE TO NOTICE OF ALLOWANCE</u>

In response to the Notice of Allowance mailed August 20, 2010, enclosed is a completed issue fee transmittal form PTOL-85b. Please charge Deposit Account No. 06-1050 $1810 for the required issue fee and publication fee.

Please apply any additional charges or credits to our Deposit Account No. 06-1050.

Respectfully submitted,

Date:<u>November 10, 2010</u>   /Geoffrey P. Shipsides, Reg. No. 55,617/
Geoffrey P. Shipsides
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Complete and send this form, together with applicable fee(s), to: **Mail**

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26161   7590   08/20/2010

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FISH & RICHARDSON P.C.
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/762,816	01/22/2004	William J. Shaw	10527-0455001	6207

TITLE OF INVENTION: **MEDICAL DEVICES**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	$1510	$300	$1810	11/20/2010

EXAMINER	ART UNIT	CLASS-SUBCLASS
STEWART, ALVIN J.	3774	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

[ ] Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

[ ] "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of a Customer Number is required.**

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. __Fish & Richardson P.C.__

2. _____

3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Boston Scientific Scimed, Inc.

(B) RESIDENCE (CITY and STATE OR COUNTRY)

Maple Grove, MN

Please check the appropriate assignee category or categories (will not be printed on the patent):   [ ] individual   [X] corporation or other private group entity   [ ] government

4a. The following fee(s) are enclosed:
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[ ] Payment by credit card. Form PTO-2038 is attached.
[X] The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number _06-1050_.

5. **Change in Entity Status** (from status indicated above)
[ ].a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.   [ ]b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.
NOTE: The issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered agent or; or the assignee or other party in interest as shown by the records of the Untied States Patent and Trademark Office.

(Authorized Signature)   /Geoffrey P. Shipsides, Reg. No. 55,617/

(Date) __November 10, 2010__

Typed or Printed Name   **Geoffrey P. Shipsides**

Registration No. _____55,617_____

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.
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